

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 720591	RECEIPT DATE:	12 / 22 / 00
IA NUMBER:	PCT/ IL99 / 00246	IA FILING DATE:	05 / 10 / 99
FAMILY NAME:	SHALEV	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	DORON	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	06 / 22 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	20270-000100	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	000000	TELEPHONE 3035714000
			FAX

NAME: CHAD S HILYARD

STREET: TWO EMBARCADERO CENTER 8TH FLOOR

CITY: SAN FRANCISCO

STATE/COUNTRY: CA ZIP: 94111

EMAIL:

APPLICATION TITLES:

TWO-WAY GROUP COMMUNICATION SYSTEM

TAB TO LAST POSITION,PUSH SEND